

MENSTRUATING TUTORS' PERCEPTIONS OF HAVING FREE MENSTRUAL PRODUCT ACCESS IN A WRITING CENTER

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Abstract

A large number of U.S. university writing centers (WCs) hire undergraduates as peer tutors, and many of them are menstruators. Menstruators have received strong cultural messages, including that menstruation should be concealed. Menstruating tutors' damaged self-recognition received from the world around them can lead to internalized self-identification and further impact their perceptions of their knowledge and consultations with student writers every day in WCs. The acceptance and accessibility of menstrual products in WCs would help boost work ethic among menstruating tutors and break down the taboo about menstruation. To explore what impact such acceptance and accessibility exert on menstruating tutors, we conducted a mixed methods case study on menstruating tutors' perceptions about themselves, their professionalism and work ethic, as well as their experiences, with and without having free access to menstrual products at their WC. We collected data via a set of pre and post surveys and individual interviews of 15 participants at the WC. The quantitative data from pre and post surveys did not reveal statistical significance, while the qualitative data helped explain why there was no statistical significance. Nevertheless, integration of all the data from this pioneering project has contributed rich findings to the existing WC scholarship about space and access, mindfulness, and social justice at large. The findings have practical applications to day-to-day WC practice.

Writing centers (WCs) are created as places that support student writers and writing (North 438), for writing is regarded as a cornerstone "of academic success" (Lems et al. 230). Many of the U.S. university WCs hire undergraduates as peer tutors. Peer tutors, who establish and maintain rapport with student writers via individual tutorials and cognitive footprint on text, should reflect the diversity of the student body, with respect to race, ethnicity, and gender (International Writing Center Association).

Based on our knowledge that the topic surrounding menstruation is lacking from ongoing WC conversations, the authors intended to explore more on menstruating tutors. Menstruating tutors' internalized non-assertiveness in their academic knowledge might stem from strong cultural messages that they have received before they join WCs (Hunzer 6-12). The messages include that they should "conceal their bodies' more physical functions, such as menstruation" (Roberts 22). Menstruation, as an uncontrollable body routine, along with menstrual products, should not be concealed. Menstrual products, as advocated in this paper, should be acceptable and accessible in WCs which are feminized spaces "via a sociospatial logic that categorizes physical locations according to their

gendered meanings and associations" and are "mostly women who want, use, and staff them" (Spitzer-Hanks). Hence WCs' acceptance and accessibility of menstrual products would break down the taboo associated with menstruation, create a physically welcoming space, positively affect menstruators' socially perceived mental ability, and further boost work ethic among menstruating peer tutors (Denmark et al. 11).

Aiming to fill the gap in the WC literature, the authors explored menstruating tutors' perceptions about themselves, their professionalism and work ethic, as well as their experiences in their WC, with and without having free access to menstrual products in their workplace. WCs are unique spaces for addressing and intervening against gendered myths and stereotypes surrounding menstruation, directly because these hurtful stereotypes about menstruators and menstruation, if left unchecked, might negatively affect tutors and indirectly because tutors, students, faculty, and administrators interact so closely with one another in WCs (a small contact zone within a larger university community). Furthermore, WCs, perceived as nurturing, supportive, and feminized, "facilitate structural changes in society, disciplines, and the institution itself" (Inoue 94; Leit et al. 9). Hence, the impact of challenging the status quo and intervening against such stereotypes in WCs might have an even greater impact beyond the physical walls and doors of WCs.

In this mixed methods case study, the authors collected data via pre and post surveys and individual interviews of 15 participants. The implications of these findings and discussions to other individual WCs would benefit the day-to-day practice in the WC field at large. This paper would also add to the existing literature about menstruation, space and access, mindfulness, and social justice in WCs.

Exigence

The first author started her current job as the assistant director of a WC in 2018. To show her hospitality and mindfulness to staff tutors, she announced in their staff meeting that she should have any possible necessities stored in her office for the staff's emergency use. Indeed, she had a stock of items that may have been of use to menstruating tutors, including Tylenol and

feminine pads. However, no tutors took advantage of this resource. One day, as she sat in her office, she heard a whisper. There was a tutor at the door. The tutor, who did not have her usual open demeanor, came up hesitantly and asked shyly, “Do you happen to have a pad? I did not expect it today and nobody around carries an extra one.” The assistant director responded, “Yes, I do.” The conversation led to the current study. It should be noted that the research team started with three tutors, menstruating and non-menstruating, contributing their input, and the current article is written by an assistant director and a menstruating tutor as the second author. The second author, who had just started tutoring at the WC at the preparation stage of the current study, is passionate about feminist studies, including menstruation myths.

Literature Review

U.S. University WCs

WC discourse predominantly “situates the tutors as peers” (Bitzel 1), with undergraduates as their staff (Straumsheim). Peer tutors are more coaches and collaborators than instructors (Harris 6), “in close contact with students and their everyday writing concerns” (Cooper 106). WCs also have a “rich tradition of fostering social justice work, whether in implicit, counter-hegemonic ways, or via explicit advocacy” (Zimmerelli 58-59). Paula Gillespie, in her article “To Boldly Go,” expresses the pride that WC staff “are the pioneers, the space explorers (literally), the innovators” (22). Asao Inoue suggests that WCs can be “centers for revolutions, for social justice work” (94). WCs’ social justice scholarship, as categorized by Randall Monty, includes accessibility and mindfulness (41), both of which will be elaborated below.

Accessibility

Accessibility in and around WCs refers to access and space. Space, to be specific, refers to “the institutional academic space” (Martinez 214) where WCs are situated, including exterior and interior design, locations, and other symbolic images (Monty 40). The institutional space is comprised of a series of “majoritarian” stories about, for, and by men (Martinez 212; Solórzano and Yosso 32). Men, as more privileged members of society, occupy most of the space and access by “naming these social locations as natural or normative points of reference” (Martinez 213).

WCs, as pioneers and innovators, have thought and rethought their own space to cultivate a contact/comfortable/safe/brave zone (e.g., Monty 40). WCs are “more intimate and personal” than a classroom

(Rollins 3) because “interactions and negotiations of bodies” during tutoring happen in the WC as “the same space” every day (McKinney 22; Monty 43). WCs are referred to as “calming...comfortable..., and friendly” as well as feminized (Leit et al. 9; McKinney 23; Spitzer-Hanks). As feminized spaces, WCs, compared to other institutional units, are in a closer and more direct connection with menstruation and the accessibility of menstrual products. Moreover, WC community is referred to as “an alternative to the home” (McKinney 26). Such an interpretation emphasizes that the WC’s space and access as well as its working condition would exert a multi-faceted impact on physical and emotional health of student writers and tutors (McKinney 31; Monty 42). This ‘home-like’ space could be essentially achieved through a mindful emphasis.

Mindfulness

Christy Wenger advocates mindfulness as the “feminist ethic of care” for WC administrators (121). Care refers to “a moral and egalitarian means of leadership, one that spreads out rather than reaches up” as “a means of flattening hierarchies and redefining professional relationships” (Wenger 120-122). Accordingly, power under such leadership “is shared and facilitative, built through relationships and governed by support [.] not control” (Wenger 122-123). In addition to leadership, hierarchy, and other power dynamics, Wenger argues that mindfulness, or “moment-to-moment awareness,” promotes cultural responsiveness to needs and material differences, along with “acceptance and inclusion” (117-130).

Randall Monty advocates mindfulness approaches for student writers. Monty believes that mindfulness practices can promote mental wellness and reconcile the spacing of bodies in WCs (43). Monty emphasizes intellectual individuality and human bodies, to which WCs can respond “by positioning themselves to serve the student’s minds and the student body” (43). Considering the aforementioned literature, we call for mindfulness from WC administrators and tutors themselves for general well-being and, specifically, for menstrual health.

Menstrual health in WC

Within the scope of our search, we could not find any WC scholarship on menstruation or its adjective, ‘menstrual’. The lack of existing research would suggest a blind spot of menstruation in the WC conversation, which, as a gap, needs to be filled because physical and perceived connotations of menstruation or menstruators are relevant to WC practices, as evidenced by the previous sections. Moreover, WCs are always

encouraged to try something ambitious and even audacious, like moonshots ([landing on the Moon], Hughes); the chosen “something” is a discourse of menstruation in WC scholarship, which can be “counter-hegemonic” and taboo-shattering by subverting certain stereotypes or expectations. In the current study, the trial was about free access to menstrual products, which has unique potentials regarding the intersections of gender and “physical and cognitive ability” (Monty 41; Richards 5).

Menstruating tutors, as the population in the current study, are aware of space and power relations “in the culture at large,” which can “often follow students into the classroom and writing center” (Mattingly and Gillespie 172). Culturally and historically, masculine values are the norm, leaving others in a position of “uncertainty and loss of control” (Bergman 287). As menstruation is not included in masculine norms, menstruators, in turn, have received strong cultural messages, such as that “their bodies are unacceptable as they are” (Roberts 22). A menstruator’s damaged self as a result of the outside world can result in their chasing an impossible ideal self. This would require that they suppress their naturally occurring processes to ‘fit in’. “Objectification and self-objectification have been shown to lead to a host of psychological problems” (Roberts 25), because of “perceived burdens on me (the individual)” and “perceived burdens in general” as a collective (Bergman 287). Messages such as the aforementioned can have a lasting impact on menstruating students in western classrooms and menstruating tutors in WCs. Menstruators, having been negated with “the concept of being human” (Martinez 214), are in spaces not traditionally constructed for them (Alvarez et al. 11; Martinez 220). The “oppressive structures present themselves as barriers – barriers to the access” which “are figuratively and sometimes literally” obstacles (Martinez 215).

The obstacles and incurred negation, as a package internalized by menstruators, seem to parallel the WC dynamics of power shift between varying combinations of gender as the tutor or tutee (O’Leary 60). Laurel Black reiterated this stereotype in her findings in which women “disavowed” their knowledge and ability when asked direct questions on their writing, using the phrase “I don’t know” (63). In such conferences, the male teacher was in a position of full control and menstruating students consequently became passive and subordinate learners; “[d]iscourse markers are used much more frequently with menstruating students than male students” (Black 64). The difference between genders is more daunting than even the most

progressive and inclusive educational settings can ever fully be aware of.

To facilitate reaching gender equality, higher education would need to initiate and implement changes in “the structure and culture” and better accommodate “the socialized preferences of women” to avoid “systemic discrimination and micro inequalities” (Bergman 295-296). WCs, as the third space (i.e., not in class or off campus, but still within the academic contact zone), can be the one to initiate the change that would help break down the menstruation myths, as detailed below.

Menstruation Myths Impacting 21st Century WC and Classroom

Western education and cultures, although more likely to provide menstrual products and factual information, unfortunately, do not exempt themselves from “social disruptions and peer antagonism” (Sommer 522). The following are common myths about menstruation which would negatively impact educational equity and access.

Myth One: Menstruation Is Dirty

As a matter of fact, the term ‘feminine hygiene’ itself indicates that “there is something ‘dirty’ about menstruators’ bodies” (Chrisler 129). Menstruators are labeled as ‘smelly’, ‘dirty’, or even ‘contaminated’ (Winkler and Roaf 3). Menstruators tend to internalize such stigma and feel the same way about their menstruation. Because people naturally and instinctively avoid talking about something ‘dirty,’ the topic of menstruation as a taboo has less due visibility and priority (Winkler and Roaf 1). For instance, Diana Fabiánová, the writer and director of the documentary *Red Moon: Menstruation, Culture & the Politics of Gender*, used to believe menstruation blood was blue when watching commercials of menstrual products as a child (21:29-21:35), due to the general stigma and manipulated color of menstruation blood. Terrified about blood stains and convinced of feminine hygiene, some menstruators “double up on protection” which “fuels a feminine hygiene industry that grows by billions every year” (Fabiánová 21:54-22:03).

Paradoxically “we shroud this natural phenomenon which is responsible for the birth and regeneration of humanity in shame, silence and indignity” (qtd. in George 20), that is, the same body is expected and praised for its fertility but disgraced and disgusted for its menstruation.

Myth Two: Menstruating Students Are Less Capable because of Menstruation

Menstruators were regarded as less capable to “handle the rigors of intellectual life because of their periods” when they “were first pushing for access to higher education” in the U.S. (Fabiánová 13:13-13:30). “Beliefs in stereotypes about limitations” in menstruators’ capabilities at certain times of the month can “produce self-fulfilling prophecies” that incur missing opportunities, such as education (Chrisler 129). The manipulated implications that menstruators’ biology somehow hinders their value in academic and larger society further perpetuate the stigma and taboo against menstruators and their menstruation.

It is not about capability; instead, it is about discomfort and embarrassment as bifold constraints. In general, “menstruating unexpectedly at work or school is a disruptive, stressful experience that adversely affects productivity due to the anxiety encompassing the lack of necessary menstrual hygiene products” (qtd. in Montano 386). This means that actions should be taken for menstruating students in the classroom and other spaces university-wide starting with mindful resources, such as free access to menstrual products.

Myth Three: There Is Enough Menstruation Care in Higher Education

A university, with physical stores and vending machines selling menstrual products, is not necessarily a welcoming and caring hub for women during menstruation. Menstruation is still shrouded in taboo and secrecy without enough public conversations (Roberts 22). Breanne Fahs, in her 2013 study, assigned a menstrual project in her class at Arizona State University, with an interest in social responses to menstruation and menstrual products in public places. The students conducted a variety of projects, from posters with tampons on them placed in “high-density” areas, such as the student cafeteria and the main classroom buildings, to labeling hundreds of menstrual products with accurate information about the menstrual cycle and handing out the products throughout campus to both menstruating and non-menstruating students. After the projects were completed, students reported feeling shocked and outraged by the degree of negativity they encountered from people, particularly men and university officials. They were stared at, avoided, and were even reprimanded. One university administrator even “removed the tampon-decorated sign from the cafeteria, saying it was ‘inappropriate for an eating environment’” (Fahs 84), which was considered as disruptive to “academic institutional norms” (Alvarez et al. 11).

As seen from the three myths above, what is daunting about mainstream knowledge on menstruation in an institutional context is that it has been manipulated, generating a falsehood of what menstruation ought to be. Undoubtedly, there are a wide variety of institutional contexts, and we, the authors, have hope for our institutional context and its ability to take on this social justice issue.

Context of the Study

Florida International University (FIU) as the context of the current study, is one of the Hispanic-Serving Institutions (HSIs) in an urban area. An HSI is an institution of higher education with 25 percent or more total undergraduate Hispanic full-time student enrollment. Over 60 percent of FIU’s undergraduate students are Latino/Hispanic (National Center for Education Statistics). The university serves first-generation and low-income students with financial hardship “who otherwise would not have access to higher education” (Lacayo; U.S.News.com). It ranked top six in social mobility among national universities in 2019 (EAB Daily Briefing).

Its WC, unlike Lori Salem’s aforementioned general statement (35-36), has been established for decades and hires students as peer tutors (it currently employs approximately 40 tutors) who serve both undergraduates and graduates, totaling 58,064 as of Fall 2019 (U.S.News.com). Its former and current directors are active in social justice scholarship of WCs or composition and rhetoric. Approximately half of the tutors were menstruators at the time of the study. The menstruators could buy menstrual products, which were available in university stores, bathroom disposal devices, and vending machines called PharmaBoxes on campus within a five-minute walking distance from the WC.

The free access, introduced and implemented in the current study, referred to free menstrual products for emergency use and free space for stocking individuals’ menstrual products. The physical space, created in the WC of the current study, was part of a cabinet in a tutors’ break room (see fig. 1 in Appendix A).

Rebecca Day Babcock and Terese Thonus remarked that WC practice “has been based largely on lore and application of theories from related fields rather than on research results” (31). To strengthen connections among theory, practice, and research about WC, we, a director and a tutor, in and for our WC, aimed to contribute to the existing evidence-based research and show its practical applications as takeaways. We intended to explore menstruating tutors’ perceptions

about themselves, their professionalism, and their work ethic, with and without having free access to menstrual products at the WC. To achieve this goal, we chose a mixed methods case study as our research design. The current research was a multiphase study within a single entity, FIU, as approved by the Institutional Review Board (IRB). The four research questions were based on the fact that the topic of free access to menstrual products was new to the WC or other university workplaces and on the question of how much perceived benefit may occur from the access. Correspondingly, it was hypothesized that having free access to menstrual products would benefit WC menstruating tutors. The first question could be answered by an analysis of quantitative data and the remaining three could be answered by qualitative findings. In a nutshell, these were the research questions for this study:

1. What are the effects of having free access to menstrual products for emergency use when participants work at the writing center?
2. What do participants perceive the physical differences before and after having the free access at work?
3. What do participants perceive the psychological differences before and after having the free access at work?
4. What else do participants perceive before and after having the free access at work?

We implemented a combination of concurrent and sequential mixed methods design in three phases (see fig. 2 in Appendix A). The first phase was conducted via questionnaire (see Appendix B), which collected both quantitative and qualitative data from closed-ended and open-ended questions, prior to having free access to menstrual products. The second phase was conducted via the same questionnaire after having the access for two months. Responses from the two rounds of questionnaires gave us clues to ask questions one-on-one in the interviews as the third/final phase. Based on findings from the three phases, a meta inference, or meta interpretation, was made. A meta inference, or meta interpretation, refers to “the judgment a researcher makes about the data that is based on the results of more than one study” (Newman et al. 192). It would improve our understanding of “how” free access worked and “not just if” it worked (Hitchcock and Newman 48). That is to say, whatever the quantitative results were, looking at individuals’ written texts and oral responses might tell us why these results were as such (i.e., explain and interpret the quantitative data).

Recruitment, Participants, and Survey

Purposive sampling was conducted to select participants for this study from FIU. Eligible participants were menstruating tutors working at the WC at the time of this study. Seventeen of them agreed to participate; 15 participated through the end of the study, composing effective data for further analysis. The selected participants were most likely to give the “most information about the phenomenon of interest” (Merriam 20). In compliance with the IRB confidentiality agreement, each participant selected a pseudonym to be referred to as in the current study.

The 15 participants, all referring to themselves as “she/her,” were aged from 18 to 37 (86.7% aged 18-27 and 13.3% at the 28-37 years old). Sixty percent of the menstruating tutors were undergraduates in progress, 33.3% as undergraduates completed, and 6.7% as masters in progress. Among the participants, 46.6% had worked at the WC for less than a year, 26.7% for 1-2 years, 6.7% for 2-3 years and 20% for over three years.

The questionnaire was developed based on the researchers’ own professional and personal experiences. The questionnaire was piloted with a group of over 10 menstruating tutors-to-be to enhance its validity. The question design, language use, and layout were changed afterward to be clearer and more user-friendly. For instance, spacing was modified for answers to some open-ended questions to make sure that participants had enough space to write. The finalized version of the questionnaire was a mixture of closed-ended and open-ended questions, including demographic information, access to menstrual products, and working experiences at the WC during menstrual periods (see Appendix B).

Data Collection and Analysis

Upon consent to this study, each participant was asked to complete a hard-copy questionnaire in a private room during their break time. It took participants a maximum of 10 minutes to complete all the questions. The same questionnaire was completed by participants after having the access for two months. One-time semi-structured interviews were conducted in English with each of the participants for approximately 10 minutes using an audio-recording device in a private room when/where only the primary researcher was present. The electronic recording and physical copies would be kept securely for three years starting from the date of publication and discarded after that time frame.

All quantitative data were entered into an SPSS database. They were then analyzed to get the result of the frequency of each choice option. The qualitative analysis should be detailed and intensive, to show the

richness and depth in the issues around menstruation; we conducted data analysis during and after data collection to explore the participants' perceptions of their experiences with and without having free access to menstrual products.

Findings

Comparative Analysis of the Pre and Post Survey

Although the quantitative data of the pre and post surveys did not show any statistically significant differences with respect to access and discomfort resulting from menstruation, they did show noticeable changes.

In the pre survey, 7 out of 14 menstruating respondents (one did not respond) often or sometimes had difficulty in having access to menstrual products at work over the last two months. To overcome the access difficulty, 9 of the 11 respondents (four did not respond) carried their own as a precaution and the other two asked their colleagues. No one gave multiple choices or chose to find the nearest vending machine/store/vender or to check out bathrooms for products on sale. Eight (53.3%) of the 15 menstruating tutors sometimes considered access issues to menstrual products as a work obstacle, but 11 (73.3%) of them never spoke about the access issues of menstrual products at work; 3 (20%) of them seldom did so, and 1 (6.7%) sometimes. Even when some of the menstruating tutors (5 out of 15) did speak about the access issues, they spoke to their co-workers and friends privately as "personal conversations" out of the WC. One of the proposed solutions was storing their own menstrual products in a cabinet at a shared office/break room in the WC, which won 11 (73.3%) agreement, 3 (20%) neutrality, and 1 (6.6%) disagreement. The other one was having free menstrual products for emergency use in a cabinet at a shared office/break room in the WC, which won 14 (93.4%) agreement and 1 (6.6%) neutrality.

In the post survey, 5 out of 15 menstruating respondents often or sometimes had difficulty in having access to menstrual products at work over the last two months, a 23% decrease from the percentage of the same choices in the pre survey. To overcome the access difficulty, 13 of the 15 respondents carried their own as a precaution, four asked their colleagues or co-workers, one chose to find the nearest vending machine and two chose others (i.e., "Lately I have used the ones available in the box given" and "search in feminine cabinet in the office"). The increasing diversity in use of resources, including free access to menstrual products, was revealed evidently. Forty percent of the 15 menstruating

tutors often considered access issues to menstrual products as a work obstacle (decreased by 13.3% from the pre survey), 60% of them never spoke about the access issues to menstrual products at work (decreased by 13.3% from the pre survey), 26.6% of them seldom did so (increased by 6.6% from the pre survey), and 13.4% sometimes (increased by 6.7% from the pre survey). When some of the menstruating tutors (6 out of 15) did speak about the access issues, they spoke to their co-workers and friends privately as "personal conversations" at and beyond the WC. One of the proposed solutions was storing their own feminine products in a cabinet at a shared office/break room in the WC, which won 93.3% agreement (increased by 20% from the pre survey) and 6.6% disagreement. The other one was having free menstrual products for emergency use in a cabinet at a shared office/break room in the WC, which won 100% agreement.

In addition to the access issues, the quantitative data of post survey showed some identical and slightly different replies with regard to perceptions about menstrual discomfort, compared to those in the pre survey. In the pre and post surveys, 80% of the menstruating tutors often or sometimes considered menstrual discomfort as a work obstacle, but only 26.7% often or sometimes spoke about it. When some of the menstruating tutors (8 out of 15 in the pre survey) did speak about their discomfort with different frequencies, they spoke to their menstruating co-workers and friends privately either in "one-on-one conversations" or in "group settings," during work, after work, or at home. The use of the words "publicly" and "in the office/break room" were new in the post survey referring to conversational discourse. To relieve menstrual discomfort during work, over 70% of participants used painkillers; a few of them listed extra products (2 in the pre survey) and preparation in advance (1 in the post survey) in their responses. Both pre and post surveys covered both majorly physical and minorly psychological discomfort, stemming from the participants' responses. The menstrual products, from participants' perspectives of both pre and post surveys, included pads, liners, tampons, wipes, and painkillers/relievers.

Perceived and Real-Life Menstrual Product Users

The researchers took it for granted that all the participants would need to use the free access to menstrual products at some point of the two-month time period. In reality, several of the menstruators either utilized the free products or reserved a clean empty tissue box for storing their own products, and they found the space to be greatly helpful in preparing for

any last-minute menstrual emergencies. Even though there was an apparent lack of participation reacting to the free access as the stimuli in the project, many, if not most, of the menstruating writing tutors found the idea and creation of the free access to menstrual products to be quite ingenious and progressive. We list the following aspects from the participants' perspectives to elaborate with details.

Increasing Comfort of the WC as a Workplace

The reserved space and free access in the WC, as changes in physical settings of the break room, helped enhance participants' self-recognition and belonging, as a psychological construct, to a great extent. Emma stated "...because it's just very convenient since it's already there...I've ex-experienced before to know that it's there, it's very comforting to me." More access approaches to menstrual products, including free access to menstrual products, were revealed evidently. One participant wrote "lately I have used the ones available in the box given" and the other wrote "search in feminine cabinet in the office." The mindset about access and space was reformed in the participants, associated with increased comfort of the WC as a workplace.

The collective mindset within the WC towards the topic of menstruation was revealed to be overwhelmingly positive, and this project itself received much praise and recognition as the driving force for opening up people's perspectives and encouraging conversations on the topic of menstruation. One of the participants, Stephanie, revealed that she felt "relieved that [she] didn't have to go like spend extra money in the PharmaBox and... it was nice having somewhere that you can like pass by and get some... there's like no judgment and like, it was nice, so I was happy there I had that, you know, I had that stash." The statements revealed that the accessibility of products within the WC alleviated the worry associated with running out of one's own menstrual products and created a safety net for menstruators to be prepared for any emergency they might have on campus. Similarly, Mary shared her thoughts:

"I think it's great and it makes like other women in the workplace more comfortable and they feel like they're not going to be stuck if something happens or ...have to leave work or anything, so um I think it's very helpful and like eases your mind in a way."

Most of the women interviewed had a positive reaction to the genesis and implementation of this menstruation project, with statements such as "I supported it wholeheartedly" (Taylor), "I think it's useful and meaningful" (Sophie), and "I think we mostly

just agreed that it's a good idea for just in case" (Ada). In regard to their enhanced mental and emotional state while being at the WC, tutor Ada said, "I think the word I'm trying to find is say like included almost, like we're being considered." Peer tutor Stephanie said, "It was way less like self-conscious than it was like doing it outside like in public, even though there were like people in there and they were like non-menstruators and menstruators alike in there." Tutor Susan also revealed that it benefited her psychologically, since she did not "have to worry about," being prepared for an emergency or the fear of running out of products at work. These positive testimonials reinforced our initial hypothesis that menstruators would benefit from having a space where they can store their own products and access free emergency products.

Taboo and Progress about Menstruation as a Public Topic

The participating menstruators spoke about how it is easier to talk among fellow menstruators than it is to talk in front of others about menstruation. Tutor Sophie said she felt "like women don't care about talking about it, but like when there are men around they are just like 'Oh no gross I don't want to talk about it' or like like 'that's your own thing' and like stuff like that." Such discomfort of talking about the subject within or around the WC was a common thread; an unprecedented stigma is strongly associated with the issue. Sophie's explanation for the silencing of her voice on the topic was echoed by many participants. For instance, Stephanie stated, "That's an issue but they don't like you know address it or it's something that's you know taboo or put under the table." In the same vein, Tania remarked, "There's just negative stigma that comes with it so I just don't really talk about it much." Taylor emphasized that it was negative reinforcement from the surroundings which silenced her voice, commenting:

"And it it's reinforced when there's a negative reaction right so, what- if it was a positive reaction I would be more likely to talk about it, but since there's a chance of a negative reaction I don't think the benefits outweigh the cost."

In discussing the causes of the hesitation to speak about the issue publicly, several tutors pointed out the stigmas and consistently negative affirmations associated with this topic, and how they have consequently resulted in an unsaid but learned behavior that menstruation should not be discussed in polite company. Tania further remarked that non-menstruators:

"...still feel uncomfortable you know talking about that or-or hearing about it, or having a woman

mention it around them, I don't know, so in order to avoid any uncomfortableness for anybody ..."

Tania's remark directly connects the perceived discomfort with the acknowledgment of the otherwise normal bodily function. Although these stigmas pervaded amongst participating menstruators, a handful of menstruating tutors commented on the progressive turn of the topic about menstruation, and how their perceptions were not as reserved as the social stigmas had encouraged. When asked about the nature of menstruation in social circles, tutor Eva said, "I feel a little bit of less of a taboo's topic than it was before," and Ada remarked on the effect of the change in attitude on her own personal view of it, "Now I feel like people are becoming more open and becoming more educated about it, so I don't feel *that* much shame around it." Although these changes have been perceived in the general opinion of the tutors' evolving experiences as menstruators, they attributed change within the WC to the implementation of the free menstrual access. Tutor Sophie said, "I think it's important for menstruators to have that kind of access 'cause like you can't control it like sometimes you really don't know when it's about to happen like you're really not prepared or sometimes you're underprepared." When expanding on what the direct psychosocial effects and purpose of the project could be, Sophie also asserted that "[access to menstrual products] will help kind of normalize or like help non-menstruators see that like look it's a normal thing and like respect those who do menstruate."

Discussions

Spaces, Access, Mindfulness, and Social Justice in WCs

As seen from the literature about space and access, the history of higher education is a series of men's stories occupying and normalizing most of the space and access (Martinez 212-213). Such a historical exertion of men's power in space on that of "others," including menstruators, has negated the naturalness and normality of menstruation and has thus left menstruators without proper stability to assert their basic right to be human (Martinez 214). Many participants mentioned the problematic disposal devices consistently out of service and the overtly public locations of vending machines or PharmaBoxes (i.e., next to Starbucks with heavy traffic). This reflects the idea that "oppressive structures present themselves as barriers – barriers to the access ... the bars are figuratively and sometimes literally" obstacles for menstruators as students and tutors (Martinez 215). The hidden denial of a space reserved for menstruators increases the burdens on them as individuals and as a

collective and can hinder the effectiveness of the WC as an inclusive space.

To enhance social justice and ensure human rights, higher education should initiate and implement changes in "the structure and culture" and better accommodate "the socialized preferences" of the others to avoid "systemic discrimination and micro inequalities" against them (Bergman 295-296). WCs have been and can continue to be pioneers for such reforms for social justice (Gillespie 22; Inoue 94). Evidently seen from the current study, the reserved space and free access in the WC, as physical changes stemming from administrators' mindfulness, greatly helped enhance participants' self-recognition, comfort, and sense of belongings. The physical comfort, metaphorically, is the tip of an iceberg with huge underwater psychological and emotional relief and recognition. Stephanie stated that "...being able to have like that access I think made me even *more* (emphasis on "more") comfortable like in the writing center." The WC was perceived as an inclusive (per Ada's choice of word "included") and caring workplace associated with increasing verbal and behavioral signals of comfort (McKinney 23; Rollins 3). Furthermore, WCs, as feminized spaces, are largely staffed and used by women (i.e., menstruators in this study); the changes in the breakout room/office of the WC would impact menstruating tutors directly and non-menstruating tutors and tutees indirectly (Leit et al. 9; Spitzer-Hanks). The mindful driving force has further opened up people's perspectives and encouraged conversation on the topic of menstruation. Such mindfulness for menstruators has had a positive impact on participants in many aspects, including their work ethic and multi-layered comfort. It should be noted that the implementation of free menstruation access has also raised public awareness and comfort in the discussion of the topic of menstruation, which further gives positive reinforcement and reassurance to menstruators. The intention and outcomes of the implementation of access to menstruators go along with Wenger's argument that mindfulness, or "moment-to-moment awareness," promotes cultural responsiveness to needs and material differences, along with "acceptance and inclusion" within tutors and beyond (117-130). As tutors are coaches and collaborators to students, their awakening mindfulness about menstruation in the WC setting would reach out to students via close contact of both verbal and written discourses during peer tutoring (Cooper 106; Harris 6).

All of the attributes mentioned above are helpful to further boost the mission and philosophy of FIU's Writing Center—to create "a welcoming, respectful, and collaborative environment to help all writers

succeed in the classroom and in their communities” (“Center for Excellence”).

Menstruation Still as a Taboo in U.S. Universities in the 21st Century

The distinctive differences in percentage from the pre and post surveys revealed that more menstruators felt that the access issues and menstruation products were a work obstacle, that they spoke about it publicly, and that the gap was also true of menstrual discomfort. Accordingly, we can safely confirm that the topic of menstruation and its associations were still a taboo in the year 2020. When the participants did speak, they preferred to speak to their co-workers and friends privately and secretly to eschew public conversations (Roberts 22). Such perpetuated stigma and internalized self-objectification about menstruation are in consonance with the existing literature (i.e., Roberts 22-26; Winkler and Roaf 1-37). When asking tutors why they think these taboos and stigmas affect the conversation around menstruation, we received multiple answers. Taylor's was a typical one:

“It's not a topic that is comfortable, I've also talked about it out loud and then I see the reactions from males, and how they get, um, and so I'm sensitive, I'm sensitive to other people's reactions, so if I know a topic is generally maybe not as accepted as normal, I'm not gonna bring it up as much, even in an environment that's like 'it's okay to talk about it', you know, just to avoid other people feeling uncomfortable, as a topic and usually it's males, but I have seen like, well not really, I've never really seen a menstruating that's uncomfortable talking about her menstrual cycle, but I don't know, we just usually don't talk about it.”

Our reviewed literature on the myth of the antagonistic nature of the education of menstruation (Roberts 22-26) is reaffirmed by these testimonials of the taboo and shame that our tutors revealed to be not only genuine, but integral to their experience and perception of menstruation. Wendy used the word “shame” in her reply:

“But you're not supposed to talk about it, and like for me I don't know if it's like a cultural thing because I'm Hispanic but it was always something like you're not supposed to tell, um, talk about it to like any person who's not like close to you or anything, it's always like something that's very hidden like you're supposed to feel like some sort of shame about it, and I've never really gotten that because like you really can't stop it, it's like a regular thing.”

These cultural negations placed upon women about the nature of their own bodies and “the concept of being human” (Chrisler 130; Martinez 214; Roberts 23-24) skew their sense of self and confidence as a student and tutor. The societal pressure on menstruation tutors in this matter and its results would also replicate and reinforce such message to tutees of all disciplines via rhetoric scaffolding. In other words, tutors in the WC have an ideologically far-reaching impact on a vast majority of students via peer tutoring of their writing. Nevertheless, the uplifting message found from the current study is that menstruators' anxieties exist, for the most part, outside the WC, and can be lessened as the WC makes more social progress. Take the responses in the post survey, for example: Uses of the words “publicly” and “in the office/break room” were new. Stephanie's statement explained the word “publicly” elaboratively— “It was way less like self-conscious than it was like doing it outside like in public, even though there were like people in there and they were like non-menstruators and menstruators alike in there.” These attitude shifts have not yet been recorded in the existing WC literature on the subject; therefore, highlighting these testimonials helps keep the ongoing conversation on the topic of menstruation in the WC field and in higher education at large.

Own Responsibility and Shared Responsibility Among Intimacies

When dealing with product access and discomfort during menstruation cycles, the participants chose to resort to themselves and then to someone they trust or feel comfortable, but not to the public (i.e., the nearest vending machine/store/vender or bathrooms that have products for sale). Such preferences echo Bergman's statement about women's “perceived burdens on me” and “perceived burdens” as a collective (287).

Such burdens on menstruators individually and collectively are not only reflected in their behaviors, but also in their utterances. Wendy, for example, used the word “personal” in her statement: “Um, like it's something that happens that we're not supposed to talk about it like it's supposed to be a personal thing like there's something wrong about it.” Sophie emphasized the internalized burdens by saying “Women don't care about talking about it, but like when there are men around they are just like ‘Oh no gross I don't want to talk about it’ or like like ‘that's your own thing’ and like stuff like that.” Many times, menstruators share their menstruation discomfort for the sake of seeking psychological comfort or physical help (i.e., menstrual products). These testimonials reflect and validate the literature of the pressures associated with speaking out about the subject, even in the WC which is considered a

feminized space (Leit et al. 9; Sommer 525; Spitzer-Hanks). With the implementation of free access to menstrual products as collective support, menstruating tutors were empowered to send the justice message to themselves and to people around; this would greatly move forward the structural changes in departments and even institutions whose stories are typically about, for, and by men (Martinez 212; Solórzano and Yosso 32).

Conclusion

Admittedly, a project in the future with a longer time frame and a larger population of menstruators would possibly reveal the long-term sociocultural and psychological changes made in the WC mindset regarding menstruation. Despite the short time span of the project, the small size of participants, and non-statistically significant quantitative data, we believe that immersive data from qualitative analysis in the recent study were strong and contributive to the existing literature in the field of WC. Through this initial pioneer endeavor, we have safely concluded, from the participants' responses, that menstruating tutors carried strong cultural messages and norms about menstruation to the WC, they tried to keep their menstruation needs and discomfort to themselves to ensure the quality of their consultations, they witnessed the changes in the physical settings, in public conversations about menstruation, and in their mindset about menstruation, and they all welcomed and supported the idea of having free menstruation access. To follow up on the recent study, we have been reaffirmed from the findings that menstruators still have room to benefit from having free menstruation access. This can be achieved by adding more styles and types of menstrual products to their preferences. This application can positively change their behavioral and social attitudes towards menstruation as well as spread the word via interactions with student writers coming to the WC. WCs, being a "more intimate and personal" hub where peer interactions happen every day, would help develop structural changes at a larger scale (i.e., social justice at an institutional level). We further advocate that such progressive and mindful practices can be replicated in other WCs and universities with a larger scale of implementation.

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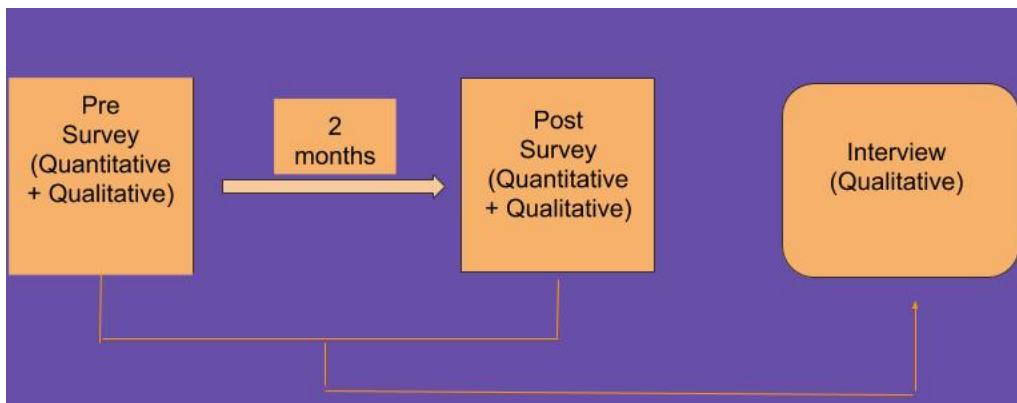
Appendix A

Figures

Figure 1. Physical space for free access to menstrual products



Figure 2. Mixed methods design of the current study in three phases



Appendix B

Survey on Feminine Care at Workplace

Preferred Unidentifiable Nickname _____ Date _____

Please feel free to stop if you feel extremely uncomfortable with the topic.

1. What is your age?

- | | |
|-----------------------|-----------------------|
| A. 18-27 years of age | B. 28-37 years of age |
| C. 38-47 years of age | D. 48-57 years of age |

2. Which pronoun(s) do you prefer to use for yourself?

- | | |
|--------------|----------------------|
| A. he/ him | B. she/her |
| C. they/them | D. he/him or she/her |

3. What level of education are you in?

- | | |
|---------------------------------|-------------------------------|
| A. Undergraduate in progress | B. Undergraduate completed |
| C. Master's program in progress | D. Master's program completed |
| E. Doctoral program in progress | F. Doctoral program completed |

4. How many years have you worked at the Writing Center?

- | | |
|-----------------------------------|----------------------------------|
| A. <1 year | B. ≥ 1 year and < 2 years |
| C. ≥ 2 years and < 3 years | D. ≥ 3 years |

5. What is your job title at the Writing Center? _____

6. How often do you have difficulty in having access to feminine products at work over the last two months?

- | | |
|-----------|--------------|
| A. Often | B. Sometimes |
| C. Seldom | D. Never |

7. How do you overcome the difficulty, if any, in having access to feminine products at work over the last two months?

- | | |
|---|----------------------------------|
| A. Carry my own as a precaution | B. Ask my colleagues/ co-workers |
| C. Find the nearest vender machine | D. Find the nearest store/vender |
| E. Check out bathrooms for products on sale | |
| F. Others, _____ | |

8. What do you think the idea of storing your own feminine products in a cabinet at the breakroom of your writing center?

- A. Totally agree
C. Neutral
E. Totally disagree
- B. Somewhat agree
D. Somewhat disagree
- And why? _____

9. What do you think the idea of having free feminine products for emergency use in a cabinet at the breakroom of your writing center?

- A. Totally agree
C. Neutral
E. Totally disagree
- B. Somewhat agree
D. Somewhat disagree
- And why? _____

10. How often do you consider access issues to feminine products as a work obstacle?

- A. Often
C. Seldom
- B. Sometimes
D. Never

11. How often do you speak about the access issues to feminine products at work?

- A. Often
C. Seldom
- B. Sometimes
D. Never

If so, to whom? _____ To which gender(s)? _____

When and where? _____

publicly or privately? _____

12. How often do you consider menstruation discomfort as a work obstacle?

- A. Often
C. Seldom
- B. Sometimes
D. Never

13. How often do you speak about your menstruation experience as a work obstacle?

- A. Often
C. Seldom
- B. Sometimes
D. Never

If so, to whom? _____

When and where? _____

publicly or privately? _____

14. What do you do to relieve/cure menstruation discomfort, if any, surrounding work?

15. How much is your cost of feminine products over the last 2 months, to your best estimate?

A. < 10 dollars

B. ≥ 10 and < 15 dollars

C. ≥ 15 and < 20 dollars

D. ≥ 20 dollars

16. What do your feminine products include? _____

Thank you for your responses.